

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Aug</i>		<i>9/29/00</i>
O.I.P.E. CLASSIFIER		<i>12346</i>	<i>11/14/00</i>
FORMALITY REVIEW	<i>DW</i>		
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/27/00
2	✓	✓	11/06/1902
3	✓	✓	11/11/2002
4	✓	✓	11/06/03
5	✓	✓	11/11/03
6	✓	✓	11/11/03
7	✓	✓	11/11/03
8	✓	✓	11/11/03
9	✓	✓	11/11/03
10	✓	✓	11/11/03
11	✓	✓	11/11/03
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If more than 150 claims or 10 actions  
staple additional sheet here

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